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jc912 U.S. PTO

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PTO/SB/05 (11-00)
Approved for use through 10-31-2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. X-778 US	
		First Inventor Lester Sanders	
		Title Method and Apparatus for Determining Power Dissipation	
		Express Mail Label No. EL620970178US	

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Commissioner for Patents Box Patent Application Washington, DC 20231		
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification [Total Pages 22] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequent listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) [Total Sheets 3]</p> <p>4. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 16 completed) <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p>	<p>6. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</p> <p>7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p>	ACCOMPANYING APPLICATION PARTS <p>8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)</p> <p>14. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>15. <input checked="" type="checkbox"/> Request and Certification under 35 U.S.C 122 (b)(2)(B). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>16. <input type="checkbox"/> Other:</p>	
<p>17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</p> <p><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____</p> <p>Prior application information. Examiner _____ Group / Art Unit: _____</p> <p>For CONTINUING or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.</p>			
18. CORRESPONDENCE ADDRESS			
<input checked="" type="checkbox"/> Customer Number or Bar Code Label 24309 (Insert Customer No. or Attach bar code label here) or <input type="checkbox"/> Correspondence address below			
Name Attn: Edel M. Young			
Address			
City		State	Zip Code
Country	Telephone	408-879-4969	Fax 408-377-6137
Name (Print/Type) Edel M. Young		Registration No. (Attorney/Agent) 32,451	
Signature <i>Edel M Young</i>		Date	January 22, 2001

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT (\$ **1062.00**)**Complete if Known**

Application Number	Not Yet Known
Filing Date	January 22, 2001
First Named Inventor	Lester Sanders
Examiner Name	Not Yet Known
Group /Art Unit	Not Yet Known
Attorney Docket No.	X-778 US

METHOD OF PAYMENT

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

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Account
Number

Deposit
Account
Name

24-0040

XILINX, INC.

☐ Charge Any Additional Fee Required
Under 37 CFR §§ 1.16 and 1.17

- 2.
- ☐
- Payment Enclosed:

☐ Check ☐ Money Order ☐ Other**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)		
101	710	Utility filing fee	\$710
106	320	Design filing fee	
107	490	Plant filing fee	
108	710	Reissue filing fee	
114	150	Provisional filing fee	
SUBTOTAL (1)			(\$ 710.00)

2. EXTRA CLAIM FEES

	Extra	Fee from below	Fee Paid
Total Claims 24 - 20** =	4	18	\$72
Indep Claims 6 - 3** =	3	80	\$240
Multiple Dependent			

Large Entity		Fee Description
Fee Code	Fee (\$)	
103	18	Claims in excess of 20
102	80	Independent claims in excess of 3
104	270	Multiple dependent claim, if not paid
109	80	**Reissue independent claims over original patent
110	18	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ **312.00**)

**or number previously paid, if greater, For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity

Fee Fee

Code (\$)

Fee Description**Fee Paid**

105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing fee or cover sheet.	
147	2,520	For filing a request for reexamination	
112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	Requesting publication of SIR after Examiner action	
115	110	Extension for reply within first month	
116	390	Extension for reply within second month	
117	890	Extension for reply within third month	
118	1,390	Extension for reply within fourth month	
128	1,890	Extension for reply within fifth month	
119	310	Notice of Appeal	
120	310	Filing a brief in support of an appeal	
121	270	Request for oral hearing	
138	1,510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1,240	Petition to revive - unintentional	
142	1,240	Utility issue fee (or reissue)	
122	130	Petitions to the Commissioner	
123	50	Petitions related to provisional applications	
126	240	Submission of Information Disclosure Stmt	
581	40	Recording each patent assignment per property (times number of properties)	\$40
146	710	Filing a submission after final rejection (37 CFR 1.129(a))	
149	710	For each additional invention to be examined (37 CFR 1.129(b))	
179	710	Request for Continued Examination (RCE)	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid **SUBTOTAL (3)** (\$ **40.00**)**SUBMITTED BY**

Complete (if applicable)

Name (Print/Type)	Edel M. Young	Registration No. (Attorney/Agent)	32,451	Telephone	408-879-4969
Signature	<i>Edel M. Young</i>	Date	01-22-2001		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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PTO/SB/35 (11-00)

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**REQUEST AND CERTIFICATION
UNDER
35 U.S.C. 122(b)(2)(B)(i)**

First Named Inventor	Lester Sanders
Title	Method and Apparatus for Determining Dissipation
Atty Docket Number	X-778 US

jc841 U.S. PTO
01/22/01

01/22/01

I hereby certify that the invention disclosed in the attached application **has not and will not be** the subject of an application filed in another country, or under a multilateral agreement, that requires publication at eighteen months after filing. I hereby request that the attached application not be published under 35 U.S.C. 122(b).

January 22, 2001

Date

Edel M Young
Signature

Edel M. Young Reg. No. 32,451

Typed or printed name

This request must be signed in compliance with 37 CFR 1.33(b) and submitted with the application **upon filing**.

Applicant may rescind this nonpublication request at any time. If applicant rescinds a request that an application not be published under 35 U.S.C. 122(b), the application will be scheduled for publication at eighteen months from the earliest claimed filing date for which a benefit is claimed.

If applicant subsequently files an application directed to the invention disclosed in the attached application in another country, or under a multilateral international agreement, that requires publication of applications eighteen months after filing, the applicant **must** notify the United States Patent and Trademark Office of such filing within forty-five (45) days after the date of the filing of such foreign or international application. **Failure to do so will result in abandonment of this application (35 U.S.C. 122(b)(2)(B)(iii)).**

Burden Hour Statement: This collection of information is required by 37 CFR 1.213(a). The information is used by the public to request that an application not be published under 35 U.S.C. 122(b) (and the PTO to process that request). Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 6 minutes to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.